

# YANKTON COUNTY

## Application for Employment

Yankton County is an equal opportunity employer and does not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify the Yankton County Auditor.

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position(s) applied for or type of work desired: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Type of employment desired: \_\_\_\_\_ full-time \_\_\_\_\_ part-time \_\_\_\_\_ temporary

Date you will be available to start work: \_\_\_\_\_

Are you able to meet the attendance requirements? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have any objection to working overtime, if necessary? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you travel if required by this position? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been previously employed by Yankton County? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you submit proof of legal employment authorization and identity? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you a veteran of the U.S. Military? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you a member of the National Guard? \_\_\_\_\_ Yes \_\_\_\_\_ No

Has your National Guard unit served a period of federal activation during a foreign conflict? \_\_\_\_\_ Yes \_\_\_\_\_ No

What was/is your rank? \_\_\_\_\_

What was/is your military occupational specialty (MOS)? \_\_\_\_\_

(Please include a copy of your DD-214 with the application)

If you are under 18, can you furnish a work permit if it is required? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been convicted of a crime in the last 7 years? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain (a conviction will not automatically bar employment): \_\_\_\_\_

Drivers license number (if driving is an essential job duty): \_\_\_\_\_

### Employment History

Please provide all employment information for your past four employers starting with the most recent.

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor and title: \_\_\_\_\_

Dates employed from: \_\_\_\_\_ to: \_\_\_\_\_ Salary: \_\_\_\_\_

Job summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor and title: \_\_\_\_\_

Dates employed from: \_\_\_\_\_ to: \_\_\_\_\_ Salary: \_\_\_\_\_

Job summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## Employment History (continued)

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Immediate supervisor and title: \_\_\_\_\_  
Dates employed from: \_\_\_\_\_ to: \_\_\_\_\_ Salary: \_\_\_\_\_  
Job summary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Immediate supervisor and title: \_\_\_\_\_  
Dates employed from: \_\_\_\_\_ to: \_\_\_\_\_ Salary: \_\_\_\_\_  
Job summary: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

## Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

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## Educational History

List school name and location, years completed, course of study, and any degrees earned:

High school: \_\_\_\_\_  
College: \_\_\_\_\_  
Technical Training: \_\_\_\_\_  
Other: \_\_\_\_\_

## References

List 3 reference names, telephone numbers, and years known (do not include relatives or employers):

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I hereby authorize Yankton County to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability Yankton County and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or Yankton County can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of Yankton County not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

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Applicant Signature

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Date